

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>R.S.</i>		<i>1/18/01</i>
FORMALITY REVIEW	<i>M.H.</i>	<i>625</i>	<i>02-06-01</i>
RESPONSE FORMALITY REVIEW	<i>R.B.</i>	<i>1078</i>	<i>08/22/01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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*2-22-01*